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Isabela de Sagua.—Acting Asst. Surg. Pedro Garcia Riera reports that 3 foreign vessels were inspected on arrival. Two bills of health were issued to foreign vessels and 9 certificates of inspection to coasting vessels.

Caibarien.—Acting Asst. Surg. Bernardo Escobar reports that 5 deaths occurred in Caibarien during the week. The principal causes of deaths were as follows: Tuberculosis, 2; pernicious fever, 1; enteritis, 1; intestinal infections, 1. No cases of a particularly infectious or contagious character were reported. One foreign vessel and 2 coasting vessels arrived during the week. One bill of health was issued to foreign vessel and 2 certificates of inspection to coasting vessels. The sanitary condition of the port is excellent.

Respectfully,

G. M. GUITÉRAS,

Passed Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL,

U. S. Marine-Hospital Service.

Reports from Santiago.

SANTIAGO DE CUBA, *May 16, 1900.*

SIR: I have the honor to make the following report of the sanitary condition of the fourth district of the island of Cuba for the week ended May 12, 1900:

Santiago.—There was a total of 30 deaths in the civil population of the city for this period, an increase of 1 over the preceding week. The principal causes of death were as follows: Tuberculosis, 2; tetanus, 2; malarial fevers, 6; intestinal diseases, 4; pneumonia, 6; heart disease, 2; other causes, 8; total, 30. Population, 43,000; mortality, 36.27.

The weather has been continuously rainy for this period which might cause the high death rate; the real cause, however, is undoubtedly due to the scarcity and the high price of nourishing food stuffs.

Disinfected.—May 7 the Venezuelan schooner *Ynes* was disinfected prior to sailing for San Juan, P. R.; 17 passengers were carried, their effects being steamed or formaldehyded. May 10 the Norwegian steamship *Heim* was disinfected prior to sailing for Mobile, Ala.

Manzanillo.—Acting Asst. Surg. R. de Socarras reports 3 deaths for this period, the causes of which were: Heart disease, 1; pneumonia, 1; inanition, 1. Total, 3.

Guantanamo.—Acting Asst. Surg. Luis Espin reports 11 deaths for this period, the following being the principal causes: Malarial fever, 5; pneumonia, 1; cancer, 1; nephritis, 1; dysentery, 1; other causes, 2; total, 11.

Daiquiri.—Acting Asst. Surg. Juan J. de Jongh reports no deaths. No quarantinable diseases have been reported in this district.

Respectfully,

HERMAN B. PARKER,

Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL,

U. S. Marine-Hospital Service.

Labeling of baggage.

SANTIAGO DE CUBA, *May 19, 1900.*

SIR: In reply to your letter of May 8, 1900 (R. M. W.) in reference to the labeling of baggage at this port, I have the honor to report that the following is my method of procedure:

When a passenger applies for a health certificate he is informed that

one will not be issued to him until within twenty-four hours of the sailing of the steamer, and that he must bring his baggage at the time he gets his certificate. Two forms of certificates are issued, immune and nonimmune. The nonimmune form (red), inclosure No. 1, I thought better than the old form, inclosure No. 2, which did not give the ultimate destination of the individual or direction to the chief disinfecter as to what disposition is to be made of the baggage. The immune certificates, inclosure No. 3, will be changed so that they will read thus when the present supply is exhausted. The data given by the applicant is then entered in a record book, a specimen page of which is inclosed, inclosure No. 4. He then presents his certificate to the chief disinfecter, who acts according to directions, labeling baggage accordingly. Disinfected baggage is sealed, baggage inspected and passed, and steamed bundles for use on the voyage are not sealed. The chief disinfecter keeps a record of work done, a specimen page of which is inclosed, inclosure No. 5. The passenger then applies for his ticket, which, by arrangement with agent, he can not procure until he presents his health certificate. From March 26 until the present time you will find statistics of the work done in this department, inclosure No. 6.

While I believe this to be the best system I can employ, it is not without faults. There may be illicit smuggling, which at this end of the line is almost impossible to prevent; then, again, false information may be given as to destination, but I believe this to be rare, as we are more or less acquainted with the destination of nearly all before they apply for certificates.

I have not included this work in my weekly report, but in the future will do so, so that the data can be easily compiled at any time.

Respectfully,

HERMAN B. PARKER,

Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL, *U. S. Marine-Hospital Service.*

DOMINION OF CANADA.

Smallpox in New Brunswick.

FREDERICTON, NEW BRUNSWICK, *March 15, 1900.*

SIR: In compliance with the resolutions adopted at the conference of State and provincial boards of health, held at Toronto, October 6, 1886, respecting interstate notification of contagious diseases, I beg to make the following statement regarding the prevalence of smallpox as reported in New Brunswick at the present time:

Municipality.	County.	Date of outbreak.	Source.	Cases.				Remarks.			
				Total.	Still sick.	Died.	Recovered.	Houses disinfected.	Houses at present infected.	Isolated in hospital.	Isolated in private houses.
Addington	Restigouche	Jan. 19.....	A tramp; infection.	13	6	0	7	3	3	.....	6
Dalhousie	do	Jan. 24.....	do	41	2	0	39	8	6	.....	2
Balmoral.....	do	do	do	8	0	0	8	1	1	.....	.....
Colborn.....	do	Jan. 19.....	do	11	0	0	11	3	0	.....	.....
Durham.....	do	Jan. 20.....	do	9	2	0	7	3	2	.....	2
Total.....	.....	.....	.....	72	10	0	72	18	12	.....	10

Respectfully,

BENJAMIN COBURN, M. D., *Secretary.*

The SURGEON-GENERAL, *U. S. Marine-Hospital Service.*